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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

		Application No.	09/823,212
		Filing Date	March 30, 2001
		First Named Inventor	Tinku Acharya
		Group Art Unit	Not Assigned
		Examiner Name	Not Assigned
Total Number of Pages in This Submission	12	Attorney Docket Number	42390P11276

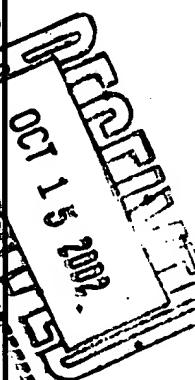
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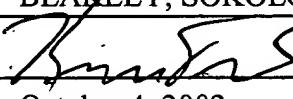
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ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <div style="border: 1px solid black; padding: 5px;"> -Return Receipt Postcard -Copy of the PCT Search Report -Copies of 3 Cited References </div>
<div style="border: 1px solid black; padding: 5px; height: 40px;"> Remarks </div>		



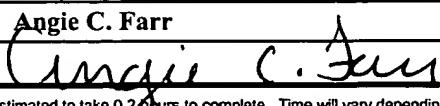
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Kerry D. Tweet, Reg. No. 45,959 BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP	
Signature		
Date	October 4, 2002	

CERTIFICATE OF MAILING/TRANSMISSION

I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class mail with sufficient postage in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on:

October 4, 2002

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Signature		Date	October 4, 2002

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EE TRANSMITTAL for FY 2002

Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT **(\$)**

Complete if Known

Application Number	09/823,212
Filing Date	March 30, 2001
First Named Inventor	Tinku Acharya
Examiner Name	Not Assigned
Group/Art Unit	Not Assigned
Attorney Docket No.	42390p11276

METHOD OF PAYMENT (check one)

Check Credit card Money Order Other None
 Deposit Account

Deposit Account Number **02-2666**

Deposit Account Name **Blakely, Sokoloff, Taylor & Zafman LLP**

The Commissioner is authorized to: (check all that apply)

Charge fee(s) indicated below Credit any overpayments
 Charge any additional fee(s) required under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.
 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account

FEE CALCULATION**1. BASIC FILING FEE**

Large Entity		Small Entity		Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)	
101	740	201	370	Utility filing fee
106	330	206	165	Design filing fee
107	510	207	255	Plant filing fee
108	740	208	370	Reissue filing fee
114	160	214	80	Provisional filing fee
SUBTOTAL (1)		(\$)		

2. EXTRA CLAIM FEES

Total Claims	Independent Claims	Multiple Dependent	Extra Claims	Fee from below	Fee Paid
			=	=	=

Large Entity		Small Entity		Fee Description
Fee Code	Fee (\$)	Fee Code	Fee (\$)	
103	18	203	9	Claims in excess of 20
102	84	202	42	Independent claims in excess of 3
104	280	204	140	Multiple Dependent claim, if not paid
109	84	209	42	**Reissue independent claims over original patent
110	18	210	9	**Reissue claims in excess of 20 and over original patent
SUBTOTAL (2)		(\$)		

**or number previously paid, if greater. For Reissues, see below

3. ADDITIONAL FEES

Large Entity	Fee Code	Fee (\$)	Small Entity	Fee Code	Fee (\$)	Fee Description	Fee Paid
	105	130		205	65	Surcharge - late filing fee or oath	
	127	50		227	25	Surcharge - late provisional filing fee or cover sheet	
	139	130		139	130	Non-English specification	
	147	2,520		147	2,520	For filing a request for ex parte reexamination	
	112	920*		112	920*	Requesting publication of SIR prior to Examiner action	
	113	1,840*		113	1,840*	Requesting publication of SIR after Examiner action	
	115	110		215	55	Extension for reply within first month	
	116	400		216	200	Extension for reply within second month	
	117	920		217	460	Extension for reply within third month	
	118	1,440		218	720	Extension for reply within fourth month	
	128	1,960		228	980	Extension for reply within fifth month	
	119	320		219	160	Notice of Appeal	
	120	320		220	160	Filing a brief in support of an appeal	
	121	280		221	140	Request for oral hearing	
	138	1,510		138	1,510	Petition to institute a public use proceeding	
	140	110		240	55	Petition to revive - unavoidable	
	141	1,280		241	640	Petition to revive - unintentional	
	142	1,280		242	640	Utility issue fee (or reissue)	
	143	460		243	230	Design issue fee	
	144	620		244	310	Plant issue fee	
	122	130		122	130	Petitions to the Commissioner	
	123	50		123	50	Processing fee under 37 CFR 1.17(q)	
	126	180		126	180	Submission of Information Disclosure Stmt	
	581	40		581	40	Recording each patent assignment per property (times number of properties)	
	146	740		246	370	Filing a submission after final rejection (37 CFR § 1.129(a))	
	149	740		249	370	For each additional invention to be examined (37 CFR § 1.129(b))	
	179	740		279	370	Request for Continued Examination (RCE)	
	169	900		169	900	Request for expedited examination of a design application	
Other fee (specify)							

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) **(\$)****SUBMITTED BY****Complete (if applicable)**

Name (Print/Type)	Kerry D. Tweet	Registration No. (Attorney/Agent)	45,959	Telephone	(503) 684-6200
Signature				Date	10/04/02

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